# Row 7975

Visit Number: 65d829bbbb69f5160e42c2c946df29ab8560643ab41b5b5e8a048486b703aebf

Masked\_PatientID: 7961

Order ID: 8820bf4a64346820a115916cb3593fa60437d077a1ca68d16ec458dab02cfe54

Order Name: CT Chest, High Resolution

Result Item Code: CTCHEHR

Performed Date Time: 02/8/2016 18:26

Line Num: 1

Text: HISTORY ILD - to assess GGO when compared to 30.6.16. Liver transplant TECHNIQUE Scans acquired as per department protocol. Intravenous contrast: Nil FINDINGS Comparison is made with the previous examination performed on 13 June 2016 and review of previous CT scans dating back to 2011. Chest radiograph show a slight decrease in volume since the previous study. There is extensive honeycombing particularly in the lung bases with patchy areas of peripheral honeycombing in the upper lobes. Confluent fibrotic changes are present particularly in the upper lobe. The distribution of the fibrotic changes and honeycombing is similar to the most recent scan of 13 June 2016 but has progressed since the earlier scans performed since 2011. The extent of the fibrotic changes however similar to the CT scan performed in March 2016. Ground-glass changes are present in both lungs particularly affecting the middle lobe and both lower lobe. The extent of the ground-glass change has improved since 13 June 2016. No overt enlargement of the mediastinal lymph nodes is demonstrated. CONCLUSION Residual ground-glass change remains detectable on the current CT scan in keeping with a residual pneumonitis, possibly infective. The changes however has shown a significant improvement when compared with the previous examination of 30 June 2016. Extensive honeycombing in the lung bases and periphery of the lung would be in keeping with sequelae of end-stage fibrosis. Disease progression and current appearance raises the possibility of underlying UIP versus fibrotic NSIP. May need further action Reported by: <DOCTOR>

Accession Number: 31d23a7e07f09cc985ecc3867f67e24799e710b8920badee6b033e6389d1645f

Updated Date Time: 03/8/2016 11:07

## Layman Explanation

This radiology report discusses HISTORY ILD - to assess GGO when compared to 30.6.16. Liver transplant TECHNIQUE Scans acquired as per department protocol. Intravenous contrast: Nil FINDINGS Comparison is made with the previous examination performed on 13 June 2016 and review of previous CT scans dating back to 2011. Chest radiograph show a slight decrease in volume since the previous study. There is extensive honeycombing particularly in the lung bases with patchy areas of peripheral honeycombing in the upper lobes. Confluent fibrotic changes are present particularly in the upper lobe. The distribution of the fibrotic changes and honeycombing is similar to the most recent scan of 13 June 2016 but has progressed since the earlier scans performed since 2011. The extent of the fibrotic changes however similar to the CT scan performed in March 2016. Ground-glass changes are present in both lungs particularly affecting the middle lobe and both lower lobe. The extent of the ground-glass change has improved since 13 June 2016. No overt enlargement of the mediastinal lymph nodes is demonstrated. CONCLUSION Residual ground-glass change remains detectable on the current CT scan in keeping with a residual pneumonitis, possibly infective. The changes however has shown a significant improvement when compared with the previous examination of 30 June 2016. Extensive honeycombing in the lung bases and periphery of the lung would be in keeping with sequelae of end-stage fibrosis. Disease progression and current appearance raises the possibility of underlying UIP versus fibrotic NSIP. May need further action Reported by: <DOCTOR>. In simpler terms, this means...

## Summary

No diseases detected.  
No specific organs mentioned.  
No symptoms mentioned.